

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN119AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/28/2010
NAME OF PROVIDER OR SUPPLIER HORIZON HILLS RSD GRP CARE 1		STREET ADDRESS, CITY, STATE, ZIP CODE 8115 MOHAWK LN RENO, NV 89506		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments Surveyor: 28384 The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of a required grading re-survey conducted in your facility on 1/28/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for seven Residential Facility for Group beds for elderly and disabled persons, Category I residents. The census at the time of the survey was six. Six resident files were reviewed and two employee files were reviewed. The facility received a survey grade of B.	Y 000		
Y 251 SS=F	449.217(2) Storage of Food-Perishable foods refrigerated NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less. This Regulation is not met as evidenced by: Surveyor: 28384 Based on observation and interviews on 1/28/10,	Y 251		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 251	Continued From page 1 the facility failed to ensure refrigerated foods were kept at a temperature of 40 degrees or less. The temperature of the kitchen refrigerator read 43 degrees at the time of the survey. This was a repeat deficiency from the 12/15/09 State Licensure survey. Severity: 2 Scope: 3	Y 251			
Y 877 SS=D	449.2742(5) OTC medications & Dietary Supplements NAC 449.2742 5. An over-the-counter medication or a dietary supplement may be given to a resident only if the resident's physician has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician. The administration of over-the-counter medication and dietary supplements must be included in the record required pursuant to paragraph (b) of subsection 1 of NAC 449.2744. This Regulation is not met as evidenced by: Surveyor: 28384 Based on record review and interview on 1/28/10, the facility did not obtain physician orders to administer over-the-counter (OTC) medications to 1 of 6 residents (Resident #1- Tums Regular strength and Oragel). The facility also failed to	Y 877			

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Y 877	Continued From page 2 include OTC medications on the medication administration record (MAR). This was a repeat deficiency from the State Licensure survey on 12/15/09. Severity: 2 Scope: 1	Y 877			
Y 885 SS=E	449.2742(9) Medication / Destruction NAC 449.2742 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication. This Regulation is not met as evidenced by: Surveyor: 28384 Based on observation and interview on 1/28/10, the facility failed to destroy medications after they were discontinued, had expired or after a resident had been transferred. Severity: 2 Scope: 2	Y 885			

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